

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled:

which a patent is s	ought on the inv	vention entitled:			
HUMAN IN	MUNODEFIC	IENCY VIRUS A	E TREATMENT OF ND RELATED CO IBITORS AND AN		
The specification of	of which, with a	ny Preliminary An	nendment, (check one	e)	
[] is attached here	eto				
[X] was filed on	January 30, 200	4 as United States	Application Serial N	o. 10/769,485.	
•			e contents of the abony amendment referre		
_	-	e information whic of Federal Regula	_	tability of this application	
application(s) for j	patent or inventon for patent or in	or's certificate liste nventor's certificate		e, §119 of any foreign o identified below any before that of the	
PRIOR FOREIGN	I APPLICATIO	N(S)	Prio	rity Claimed	
PCT/US / (Number)	PCT (Country)	(Day/month/year file		Yes []No	
I hereby claim the benefit under Title 35, United States Code, §119(e) and §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:					
(US Patent No.)	(Filing	g date)	(Iss	ue Date)	
(Application Seria	l No.) 60/443,9	10 (Filing date) January 31, 2003	(Status) Provisional	

POWER OF ATTORNEY

As a named inventor, I hereby appoint as attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith the following attorneys ad agents, their registration numbers being listed after their names:

S. Christopher BAUER, Reg. No. 42,307 Julie C. LAPPIN, Reg. No. 46,612 Kenton N. FEDDE, Reg. No. 54,701 J. Timothy KEANE, Reg. No. 27,808 Patricia K. FITZSIMMONS, Reg. No. 52,894 Philip B. POLSTER II, Reg. No. 43,864

Rachel A. POLSTER, Reg. No. 47,004 Joseph R. SCHUH, Reg. No. 48,180 Christopher W. SLAVINSKY, Reg. No. 54,456 James M. WARNER, Reg. No. 45,199 Scott A. WILLIAMS, Reg. No. 39,876

All correspondence and telephone communications should be addressed to:

Customer Number: 26648

James M. Warner, Reg. No. 45,199

Te: (314) 274-3642

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR RESIDENCE & CITY Northbrook LIL USA CITIZENSHIP POST OFFICE ADDRESS OFFICE ADDRESS SIGNATURE OF	1.)	LAST NAME	FIRST NAME	MIDDLE NAME
& CITIZENSHIP POST POST OFFICE ADDRESS OFFICE ADDRESS IL USA USA USA CITY STATE OR COUNTRY IL SIGNATURE OF		MAZIASZ	TIMOTHY	
OFFICE ADDRESS 1817 Heather Lane Northbrook COUNTRY IL SIGNATURE DATE ZIP CODE 60062	&			
SIGNATURE DATE ZIP CODE OF 60062	OFFICE	1817 Heather Lane	· · · ·	COUNTRY
INVENTOR 1	OF	/ / //	DATE /1/04	ZIP CODE 60062



y Docket No. 01379/1/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Timothy Maziasz Serial No. 10/769,485 Filed January 30, 2004 Confirmation No. 8927 Art Unit Unknown

For METHODS AND COMPOSITIONS FOR THE TREATMENT OR PREVENTION OF HUMAN IMMUNODEFICIENCY VIRUS AND RELATED CONDITIONS USING CYCLOOXYGENASE-2 SELECTIVE INHIBITORS AND ANTIVIRAL AGENTS Examiner Unknown

September 1, 2004

SEPARATE PAPER IDENTIFYING ATTORNEYS/AGENTS TO BE DESIGNATED OF RECORD

COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VIRGINIA 22313-1450

SIR:

In accordance with new rule 37 CFR 1.32(c)(3), applicant designates the following ten (10) attorneys/agents to be of record in the above-referenced application.

S. Christopher Bauer,	Reg.	No.	42,305
Patricia K. Fitzsimmons,	Reg.	No.	52,894
J. Timothy Keane,	Reg.	No.	27,808
Julie M. Lappin,	Reg.	No.	46,612
Philip B.Polster II,	Reg.	No.	43,864
Rachel Polster,	Reg.	No.	47,004
Joseph R. Schuh,	Reg.	No.	48,180
Christopher W.Slavinsky,	Reg.	No.	54,456
James M. Warner,	Reg.	No.	45,199
Scott A. Williams,	Reg.	No.	39,876